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**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

**RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC**

Report Covering the Period

From: 04/01/2009

To: 06/30/2009

**I. RECEIPTS****COLUMN A**  
**Total This Period****COLUMN B**  
**Election Cycle-to-Date**

16. FEDERAL FUNDS (Itemize on Schedule A-P) .....

0.00

0.00

17. CONTRIBUTIONS (other than loans) FROM :

(a) Individuals/Persons Other Than Political Committees .....

12285.00

9985.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees .....

0.00

2000.00

(d) The Candidate .....

500000.00

700000.00

(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d)) .....

512285.00

711985.00

18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

0.00

0.00

19. LOANS RECEIVED:

(a) Loans Received From or Guaranteed by Candidate .....

0.00

300000.00

(b) Other Loans .....

0.00

0.00

(c) TOTAL LOANS (Add 19(a) and 19(b)) .....

0.00

300000.00

20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :

(a) Operating .....

587.88

587.88

(b) Fundraising .....

0.00

0.00

(c) Legal and Accounting .....

0.00

0.00

(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c)) .....

587.88

587.88

21. OTHER RECEIPTS (Dividend, Interest, etc.) .....

351.02

351.02

22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21) .....

513223.90

1012923.90

**II. DISBURSEMENTS**

23. OPERATING EXPENDITURES .....

435267.41

829189.07

24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....

0.00

0.00

25. FUNDRAISING DISBURSEMENTS .....

0.00

0.00

26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS .....

0.00

0.00

27. LOAN REPAYMENTS MADE :

(a) Repayment of Loans made or Guaranteed by Candidate .....

0.00

0.00

(b) Other Repayments .....

0.00

0.00

(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)) .....

0.00

0.00

28. REFUNDS OF CONTRIBUTIONS TO :

(a) Individuals/Persons Other Than Political Committees .....

0.00

2300.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees .....

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c)) .....

0.00

2300.00

29. OTHER DISBURSEMENTS .....

0.00

0.00

30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) .....

435267.41

831489.07

**III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)**

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) .....

0.00

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE**  
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)  
 (PAGE 3, FEC FORM 3P)

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**1. NAME OF COMMITTEE (in full)****RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC****ADDRESS (number and street)**C/O JOHN GROSS  
PROSKAUER ROSE LLP 1585 BROADWAY**CITY, STATE, and ZIP CODE**

NEW YORK

NY

100368299

**2. IDENTIFICATION NUMBER**

C00430512

## ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			<b>TOTALS</b>	<b>0.00</b>	<b>0.00</b>

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Transaction ID: SC-1

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
RUDOLPH W. GIULIANI-LOAN FROM PERSONAL FU -  
[PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼Mailing Address 1177 AVENUE OF THE AMERICAS  
19TH FLOOR

City NEW YORK State NY ZIP Code 10036

Original Amount of Loan

500000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 4D D  
0 9Y Y Y Y  
2 0 0 8

12/31/2009

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

500000.00

**TOTALS** This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Transaction ID: SC-2

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
RUDOLPH W. GIULIANI-LOAN FROM PERSONAL FU -  
[PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼Mailing Address 1177 AVENUE OF THE AMERICAS  
19TH FLOOR

City NEW YORK State NY ZIP Code 10036

Original Amount of Loan

300000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

300000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 5D D  
3 0Y Y Y Y  
2 0 0 8

12/31/2009

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

300000.00

**TOTALS** This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Transaction ID: SC-3

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
RUDOLPH W. GIULIANI-LOAN FROM PERSONAL FU -  
[PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼Mailing Address 1177 AVENUE OF THE AMERICAS  
19TH FLOOR

City NEW YORK State NY ZIP Code 10036

Original Amount of Loan

300000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

300000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 2D D  
1 0Y Y Y Y  
2 0 0 8

12/31/2009

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

300000.00

**TOTALS** This Period (last page in this line only) ▶

1100000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	11
<input type="checkbox"/>	12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MCCLATCHY NEWSPAPERS

 Nature of Debt (Purpose):  
PRESS TRAVEL

Mailing Address 700 12TH ST STE 1000

City	State	ZIP Code
WASHINGTON	DC	20005

Outstanding Balance Beginning This Period

334.81

Transaction ID: SD11-2

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

334.81

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
NEW YORK TIMES

 Nature of Debt (Purpose):  
PRESS TRAVEL

Mailing Address 1416 DITMAS AVE

City	State	ZIP Code
BROOKLYN	NY	11226

Outstanding Balance Beginning This Period

194.83

Transaction ID: SD11-4

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

194.83

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WTKK-FM BOSTON

 Nature of Debt (Purpose):  
PRESS TRAVEL

Mailing Address 55 MORRISSEY BLVD

City	State	ZIP Code
BOSTON	MA	02125

Outstanding Balance Beginning This Period

89.26

Transaction ID: SD11-1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

89.26

1) **SUBTOTALS** This Period This Page (optional).....

618.90

2) **TOTALS** This Period (last page this line number only).....

618.90

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

618.90

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 ACT TELECONFERENCING SERVICES INC

 Nature of Debt (Purpose):  
 UTILITIES

Mailing Address DEPT CH 17366

City	State	ZIP Code
PALATINE	IL	60055

Outstanding Balance Beginning This Period

24468.99

Transaction ID: SD-3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

24468.99

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 AT&T MOBILITY LLC

 Nature of Debt (Purpose):  
 PHONE SVC

Mailing Address PO BOX 8405

City	State	ZIP Code
PHOENIX	AZ	85062

Outstanding Balance Beginning This Period

106691.17

Transaction ID: SD-4

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106691.17

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 BANDWIDTH.COM

 Nature of Debt (Purpose):  
 UTILITIES

Mailing Address 4001 WESTON PKWY STE 100

City	State	ZIP Code
CARY	NC	27513

Outstanding Balance Beginning This Period

9133.50

Transaction ID: SD-6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9133.50

1) **SUBTOTALS** This Period This Page (optional).....

140293.66

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
BRABENDERCOXNature of Debt (Purpose):  
MEDIA

Mailing Address 100 W STATION SQUARE DR STE 315

City	State	ZIP Code
PITTSBURGH	PA	15219

Outstanding Balance Beginning This Period

69135.83

Transaction ID: SD-7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

69135.83

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
CHRIS MOTTOLA CONSULTINGNature of Debt (Purpose):  
MEDIA

Mailing Address 1382 LAFAYETTE ST

City	State	ZIP Code
CAPE MAY	NJ	08204

Outstanding Balance Beginning This Period

97890.64

Transaction ID: SD-9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

97890.64

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
CITATION SHARESNature of Debt (Purpose):  
TRAVEL

Mailing Address FIVE AMERICAN LN

City	State	ZIP Code
GREENWICH	CT	06831

Outstanding Balance Beginning This Period

18167.85

Transaction ID: SD-10

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18167.85

**1) SUBTOTALS** This Period This Page (optional).....

185194.32

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 CMDI

 Nature of Debt (Purpose):  
 LIST MANAGEMENT SVC

Mailing Address 7704 LEESBURG PKE

City	State	ZIP Code
FALLS CHURCH	VA	22043

Outstanding Balance Beginning This Period

7900.26

Transaction ID: SD-12

Amount Incurred This Period

4517.68

Payment This Period

12417.94

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 COMPLIANCE CONSULTING CO OF VA

 Nature of Debt (Purpose):  
 COMPLIANCE CONSULTING

Mailing Address PO BOX 365

City	State	ZIP Code
MCLEAN	VA	22101

Outstanding Balance Beginning This Period

1925.00

Transaction ID: SD-13

Amount Incurred This Period

750.00

Payment This Period

2675.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 CONSOLIDATED EDISON CO OF NY

 Nature of Debt (Purpose):  
 UTILITIES

Mailing Address PO BOX 1702

City	State	ZIP Code
NEW YORK	NY	10116

Outstanding Balance Beginning This Period

802.18

Transaction ID: SD-14

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

802.18

1) **SUBTOTALS** This Period This Page (optional).....

802.18

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 DELTA AIRELITE

 Nature of Debt (Purpose):  
 TRAVEL

Mailing Address 77 COMAIR BLVD

City	State	ZIP Code
ERLANGER	KY	41018

Outstanding Balance Beginning This Period

15021.48

Transaction ID: SD-15

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15021.48

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 GIULIANI PARTNERS

 Nature of Debt (Purpose):  
 RENT

Mailing Address 5 TIMES SQUARE

City	State	ZIP Code
NEW YORK	NY	10036

Outstanding Balance Beginning This Period

59290.20

Transaction ID: SD-16

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

59290.20

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 GIULIANI SECURITY & SAFETY LLC

 Nature of Debt (Purpose):  
 SECURITY SVC

Mailing Address 5 TIMES SQUARE

City	State	ZIP Code
NEW YORK	NY	10036

Outstanding Balance Beginning This Period

141643.70

Transaction ID: SD-17

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

141643.70

1) **SUBTOTALS** This Period This Page (optional).....

215955.38

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
GORDON C JAMES PUBLIC RELATIONSNature of Debt (Purpose):  
TRAVEL

Mailing Address 4715 N 32ND ST STE 104

City State ZIP Code  
PHOENIX AZ 85018

Outstanding Balance Beginning This Period

5064.19

Transaction ID: SD-18

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5064.19

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
JAMESTOWN CONSULTINGNature of Debt (Purpose):  
FINANCE CONSULTINGMailing Address 5 MAPLETON ROAD  
STE 300City State ZIP Code  
PRINCETON NJ 08540

Outstanding Balance Beginning This Period

230.00

Transaction ID: SD-99

Amount Incurred This Period

0.00

Payment This Period

230.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
JON KRAUSHAR & ASSOCIATES INCNature of Debt (Purpose):  
POLITICAL STRATEGY CONSUL-  
TING

Mailing Address 10 E 40TH ST STE 1308

City State ZIP Code  
NEW YORK NY 10016

Outstanding Balance Beginning This Period

72119.25

Transaction ID: SD-21

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

72119.25

1) **SUBTOTALS** This Period This Page (optional).....

77183.44

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 LYRIS TECHNOLOGIES INC

 Nature of Debt (Purpose):  
 WEB SVC

Mailing Address PO BOX 49023

City	State	ZIP Code
SAN JOSE	CA	95161

Outstanding Balance Beginning This Period

5400.00

Transaction ID: SD-23

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5400.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 MCGRAW COMMUNICATIONS INC

 Nature of Debt (Purpose):  
 UTILITIES

Mailing Address PO BOX 36204

City	State	ZIP Code
NEWARK	NJ	07188

Outstanding Balance Beginning This Period

48270.63

Transaction ID: SD-25

Amount Incurred This Period

-1350.08

Payment This Period

0.00

Outstanding Balance at Close of This Period

46920.55

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 OPERA NEW MEDIA LLC

 Nature of Debt (Purpose):  
 WEB SVC

Mailing Address 1280 MASSACHUSETTS AVE STE 203

City	State	ZIP Code
CAMBRIDGE	MA	02138

Outstanding Balance Beginning This Period

150000.00

Transaction ID: SD-28

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

150000.00

1) **SUBTOTALS** This Period This Page (optional).....

202320.55

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

B. Form/Schedule : **SD12**  
Transaction ID : **SD-25**

Negative amount incurred in period reflects that vendor adjusted the bill to reflect actual amount owed.

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 15 / 34

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 PRESS ASSOCIATION INC

 Nature of Debt (Purpose):  
 SUBSCRIPTIONS

Mailing Address PO BOX 414243

City	State	ZIP Code
BOSTON	MA	02241

Outstanding Balance Beginning This Period

15170.40

Transaction ID: SD-29

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15170.40

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 ROMAN TECH LLC

 Nature of Debt (Purpose):  
 COMPUTER SUPPORT

Mailing Address 8645 24TH AVE

City	State	ZIP Code
BROOKLYN	NY	11214

Outstanding Balance Beginning This Period

13500.00

Transaction ID: SD-31

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13500.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 SCOTT HOWELL & COMPANY

 Nature of Debt (Purpose):  
 MEDIA

Mailing Address 208 N MARKET ST STE 225

City	State	ZIP Code
DALLAS	TX	75202

Outstanding Balance Beginning This Period

162884.24

Transaction ID: SD-32

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

162884.24

1) **SUBTOTALS** This Period This Page (optional).....

191554.64

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 16 / 34

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
SPOUSE CONSULTINGNature of Debt (Purpose):  
POLITICAL STRATEGY CONSUL-  
TING

Mailing Address PO BOX 8635

City State ZIP Code  
CHARLESTON WV 25303

Outstanding Balance Beginning This Period

7200.00

Transaction ID: SD-34

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7200.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TAG AVIATIONNature of Debt (Purpose):  
TRAVEL

Mailing Address 6 INTERNATIONAL DR

City State ZIP Code  
RYE BROOK NY 10573

Outstanding Balance Beginning This Period

447736.92

Transaction ID: SD-35

Amount Incurred This Period

-267736.92

Payment This Period

180000.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TARRANCE GROUP INCNature of Debt (Purpose):  
TRAVEL

Mailing Address 201 N UNION ST STE 410

City State ZIP Code  
ALEXANDRIA VA 22314

Outstanding Balance Beginning This Period

36170.19

Transaction ID: SD-36

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

36170.19

1) **SUBTOTALS** This Period This Page (optional).....

43370.19

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 17 / 34

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TAUGHANNOCK AVIATION CORPNature of Debt (Purpose):  
TRAVELMailing Address TOMPKINS COUNTY AIRPORT  
66 BROWN RDCity State ZIP Code  
ITHACA NY 14850

Outstanding Balance Beginning This Period

210307.00

Transaction ID: SD-37

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

210307.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
UPSTREAM COMMUNICATIONSNature of Debt (Purpose):  
WEB SVC

Mailing Address 1609 SHOAL CREEK BLVD # 203

City State ZIP Code  
AUSTIN TX 78701

Outstanding Balance Beginning This Period

21150.00

Transaction ID: SD-39

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

21150.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VERIZON WIRELESSNature of Debt (Purpose):  
PHONE SVC

Mailing Address PO BOX 408

City State ZIP Code  
NEWARK NJ 07101

Outstanding Balance Beginning This Period

396045.23

Transaction ID: SD-40

Amount Incurred This Period

0.00

Payment This Period

150000.00

Outstanding Balance at Close of This Period

246045.23

1) **SUBTOTALS** This Period This Page (optional).....

477502.23

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 18 / 34

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VORNADO OFFICE MGMT LLCNature of Debt (Purpose):  
RENT/UTILITIES

Mailing Address 40 FULTON ST

City State ZIP Code  
NEW YORK NY 10038

Outstanding Balance Beginning This Period

176462.82

Transaction ID: SD-41

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

176462.82

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WEST MERIDIAN LLCNature of Debt (Purpose):  
MESSAGE PHONE CALLS

Mailing Address 914 164TH ST SE # 343

City State ZIP Code  
MILL CREEK WA 98012

Outstanding Balance Beginning This Period

88631.56

Transaction ID: SD-42

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

88631.56

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
XO COMMUNICATIONS LLCNature of Debt (Purpose):  
PHONE SVC

Mailing Address 14239 COLLECTIONS CENTER DR

City State ZIP Code  
CHICAGO IL 60693

Outstanding Balance Beginning This Period

11139.65

Transaction ID: SD-43

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11139.65

**1) SUBTOTALS** This Period This Page (optional).....

276234.03

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 19 / 34

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 YUMA SOLUTIONS

 Nature of Debt (Purpose):  
 COMPUTER SUPPORT

Mailing Address PO BOX 13947

City	State	ZIP Code
TALLAHASSEE	FL	32317

Outstanding Balance Beginning This Period

5000.00

Transaction ID: SD-44

Amount Incurred This Period

646.30

Payment This Period

5646.30

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

0.00

2) **TOTALS** This Period (last page this line number only)..... ▶

1810410.62

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

1100000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

2910410.62

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 34

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

MRS. PATRICIA BLACKBOURNE

Mailing Address

705 SCHUBERT ROAD

City

KINGSBURY

State

TX

Zip Code

78638-3202

FEC ID number of contributing  
federal political committee.Name of Employer  
HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	0	9

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17.159402

B.

Full Name (Last, First, Middle Initial)

MR. BRUCE DALLAS

Mailing Address

26530 WESTON DRIVE

City

LOS ALTOS HILLS

State

CA

Zip Code

94022-1984

FEC ID number of contributing  
federal political committee.Name of Employer  
DAVIS POLK & WARDWELL

Occupation

LAWYER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	0	9

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17.159360

C.

Full Name (Last, First, Middle Initial)

MR. MICHAEL A. GLAUBER

Mailing Address

14 WINCREST FALLS DRIVE

City

CYPRESS

State

TX

Zip Code

77429-5154

FEC ID number of contributing  
federal political committee.Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	0	9

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17.159473

SUBTOTAL of Receipts This Page (optional) .....

750.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 34

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

DR. DONALD HOWARD

Mailing Address

10314 SW 23RD COURT

City

DAVIE

State

FL

Zip Code

33324-7623

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF-EMPLOYED

Occupation  
DOCTOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 8 / 2 0 0 9

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17.159338

B.

Full Name (Last, First, Middle Initial)

MR. JAMES INGLIS

Mailing Address

300 INTERNATIONAL PARKWAY

City

SUNRISE

State

FL

Zip Code

33325-6240

FEC ID number of contributing  
federal political committee.

Name of Employer  
HYDRAULIC SUPPLY CO.

Occupation  
CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 8 / 2 0 0 9

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17.159412

C.

Full Name (Last, First, Middle Initial)

MR. KEVIN JACKSON

Mailing Address

3055 NORTHERN AVENUE

City

KINGMAN

State

AZ

Zip Code

86409-2033

FEC ID number of contributing  
federal political committee.

Name of Employer  
JACKSON DIGITAL IMAGING  
CORPORATION

Occupation  
CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 2 / 2 0 0 9

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17.159540

SUBTOTAL of Receipts This Page (optional) .....

750.00

TOTAL This Period (last page this line number only) .....

1500.00

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 34

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

RUDOLPH GIULIANI

Mailing Address

1177 AVENUE OF THE AMERICAS 19TH FLOOR

City

State

Zip Code

NEW YORK

NY

10036

FEC ID number of contributing  
federal political committee.

P00003251

Name of Employer

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

700000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	9	

Amount of Each Receipt this Period

200000.00

CONTRIBUTION

Transaction ID: 17D-1

B.

Full Name (Last, First, Middle Initial)

RUDOLPH GIULIANI

Mailing Address

1177 AVENUE OF THE AMERICAS 19TH FLOOR

City

State

Zip Code

NEW YORK

NY

10036

FEC ID number of contributing  
federal political committee.

P00003251

Name of Employer

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

700000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	9	

Amount of Each Receipt this Period

300000.00

CONTRIBUTION

Transaction ID: 17D-2

SUBTOTAL of Receipts This Page (optional) .....

500000.00

TOTAL This Period (last page this line number only) .....

500000.00

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 34

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

NH DEPT OF REVENUE ADMIN

Mailing Address

PO BOX 637

City

CONCORD

State

NH

Zip Code

03302

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

406.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	0	9

Amount of Each Receipt this Period

406.00

REFUND-TAXES

Transaction ID: SA20A-A.000093

SUBTOTAL of Receipts This Page (optional) .....

406.00

TOTAL This Period (last page this line number only) .....

406.00

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 34

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

OLSEN & SHUVALOV

Mailing Address

1609 SHOAL CREEK BLVD # 203

City

AUSTIN

State

TX

Zip Code

78701

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

351.02

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 0 / 2 0 0 9

Amount of Each Receipt this Period

351.02

LIST RENTAL INCOME

Transaction ID: SA21A-A.000092

SUBTOTAL of Receipts This Page (optional) .....

351.02

TOTAL This Period (last page this line number only) .....

351.02



# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 34

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

RYAN MEDRANO

Mailing Address 5 EAST 22ND ST

City NEW YORK State NY Zip Code 10010

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.017777

Date of Disbursement

04 / 16 / 2009

Amount of Each Disbursement this Period

18500.00

B.

Full Name (Last, First, Middle Initial)

RYAN MEDRANO

Mailing Address 5 EAST 22ND ST

City NEW YORK State NY Zip Code 10010

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.017778

Date of Disbursement

05 / 13 / 2009

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

RYAN MEDRANO

Mailing Address 5 EAST 22ND ST

City NEW YORK State NY Zip Code 10010

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.017779

Date of Disbursement

06 / 23 / 2009

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) .....

28500.00

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 34

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

<b>A.</b> Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	<b>Transaction ID:</b> SB23-0.000545 <b>Date of Disbursement</b>																				
Mailing Address PO BOX 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	0	9												
City PHOENIX State AZ Zip Code 85072	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK FEE	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>10.88</td> </tr> </table>																				10.88
									10.88												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	<b>Transaction ID:</b> SB23-0.000545B <b>Date of Disbursement</b>																				
Mailing Address PO BOX 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	0		2	0	0	9												
City PHOENIX State AZ Zip Code 85072	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK FEE	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>78.50</td> </tr> </table>																				78.50
									78.50												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) AON	<b>Transaction ID:</b> SB23-0.018621 <b>Date of Disbursement</b>																				
Mailing Address 199 WATER STREET	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	0	9												
City NEW YORK State NY Zip Code 10038-2703	Amount of Each Disbursement this Period																				
Purpose of Disbursement INSURANCE	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>12500.00</td> </tr> </table>																				12500.00
									12500.00												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**12589.38**

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PKE

City  
FALLS CHURCH

State  
VA

Zip Code  
22043

Purpose of Disbursement  
LIST MANAGEMENT SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.018993

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7900.26

B.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PKE

City  
FALLS CHURCH

State  
VA

Zip Code  
22043

Purpose of Disbursement  
LIST MANAGEMENT SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.018994

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4517.68

C.

Full Name (Last, First, Middle Initial)

COMPLIANCE CONSULTING CO OF VA

Mailing Address PO BOX 365

City  
MCLEAN

State  
VA

Zip Code  
22101

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.018624

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2675.00

SUBTOTAL of Disbursements This Page (optional) .....

15092.94

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

<b>A.</b> Full Name (Last, First, Middle Initial) FEDEX	<b>Transaction ID:</b> SB23-0.018629 <b>Date of Disbursement</b>																				
Mailing Address PO BOX 371461	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	4		2	0	0	9												
City PITTSBURGH State PA Zip Code 15250-7461	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement DELIVERY	<table border="1"> <tr> <td colspan="10">15.52</td> </tr> </table>	15.52																			
15.52																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) HOLTZMAN VOGEL PLLC	<b>Transaction ID:</b> SB23-0.018654 <b>Date of Disbursement</b>																				
Mailing Address 98 ALEXANDRIA PIKE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	3		2	0	0	9												
City WARRENTON State VA Zip Code 20186	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement LEGAL CONSULTING	<table border="1"> <tr> <td colspan="10">22596.13</td> </tr> </table>	22596.13																			
22596.13																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) HOLTZMAN VOGEL PLLC	<b>Transaction ID:</b> SB23-0.018655 <b>Date of Disbursement</b>																				
Mailing Address 98 ALEXANDRIA PIKE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	3		2	0	0	9												
City WARRENTON State VA Zip Code 20186	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement LEGAL CONSULTING	<table border="1"> <tr> <td colspan="10">7500.00</td> </tr> </table>	7500.00																			
7500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

30111.65

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 34

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

JAMESTOWN CONSULTING

Mailing Address 5 MAPLETON ROAD  
STE 300

City PRINCETON State NJ Zip Code 08540

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.018990

Date of Disbursement

06 / 22 / 2009

Amount of Each Disbursement this Period

230.00

B.

Full Name (Last, First, Middle Initial)

LOCKART ATCHLEY & ASSOCIATES LLP

Mailing Address 6850 AUSTIN CENTER BLVD  
STE 180

City AUSTIN State TX Zip Code 78731-3129

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.018625

Date of Disbursement

06 / 17 / 2009

Amount of Each Disbursement this Period

316.80

C.

Full Name (Last, First, Middle Initial)

LOCKART ATCHLEY & ASSOCIATES LLP

Mailing Address 6850 AUSTIN CENTER BLVD  
STE 180

City AUSTIN State TX Zip Code 78731-3129

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.018888

Date of Disbursement

05 / 13 / 2009

Amount of Each Disbursement this Period

5270.60

SUBTOTAL of Disbursements This Page (optional) .....

5817.40

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 34

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

NOVA INFORMATION SYSTEMS

Mailing Address 7300 CHAPMAN HWY

City KNOXVILLE State TN Zip Code 37920

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23-0.018647

Date of Disbursement

04 / 01 / 2009

Amount of Each Disbursement this Period

130.00

B.

Full Name (Last, First, Middle Initial)

NOVA INFORMATION SYSTEMS

Mailing Address 7300 CHAPMAN HWY

City KNOXVILLE State TN Zip Code 37920

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23-0.018647B

Date of Disbursement

05 / 01 / 2009

Amount of Each Disbursement this Period

359.23

C.

Full Name (Last, First, Middle Initial)

NOVA INFORMATION SYSTEMS

Mailing Address 7300 CHAPMAN HWY

City KNOXVILLE State TN Zip Code 37920

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23-0.018647C

Date of Disbursement

06 / 01 / 2009

Amount of Each Disbursement this Period

190.00

SUBTOTAL of Disbursements This Page (optional) .....

679.23

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

NY STATE CORPORATE TAX

Mailing Address PO BOX 1909

City  
ALBANY

State  
NY

Zip Code  
12201

Purpose of Disbursement  
TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.018634

Date of Disbursement

06 / 11 / 2009

Amount of Each Disbursement this Period

3100.00

B.

Full Name (Last, First, Middle Initial)

NYC DEPARTMENT OF FINANCE

Mailing Address PO BOX 5040

City  
KINGSTON

State  
NY

Zip Code  
12402

Purpose of Disbursement  
TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.018635

Date of Disbursement

06 / 11 / 2009

Amount of Each Disbursement this Period

3304.00

C.

Full Name (Last, First, Middle Initial)

OH TREASURER

Mailing Address PO BOX 182101

City  
COLUMBUS

State  
OH

Zip Code  
43218

Purpose of Disbursement  
TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.018637

Date of Disbursement

05 / 26 / 2009

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional) .....

6454.00

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 23 ☐ 24 ☒ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

SPELNA INC

Mailing Address 225 INDUSTRIAL COURT

City FREDERICKSBURG State VA Zip Code 22408

Purpose of Disbursement  
DELIVERY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.000545D

Date of Disbursement

05 / 14 / 2009

Amount of Each Disbursement this Period

40.00

B.

Full Name (Last, First, Middle Initial)

SPELNA INC

Mailing Address 225 INDUSTRIAL COURT

City FREDERICKSBURG State VA Zip Code 22408

Purpose of Disbursement  
STORAGE FACILITY RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.000546C

Date of Disbursement

05 / 14 / 2009

Amount of Each Disbursement this Period

188.24

C.

Full Name (Last, First, Middle Initial)

TAG AVIATION

Mailing Address 6 INTERNATIONAL DR

City RYE BROOK State NY Zip Code 10573

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.018991

Date of Disbursement

06 / 30 / 2009

Amount of Each Disbursement this Period

180000.00

SUBTOTAL of Disbursements This Page (optional) .....

180228.24

TOTAL This Period (last page this line number only) .....



# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 34

☐ 23 ☐ 24 ☒ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

<b>A.</b> Full Name (Last, First, Middle Initial) TIVO	<b>Transaction ID:</b> SB23-0.878787 <b>Date of Disbursement</b>
Mailing Address 150 EAST 52ND STREET 15TH FLR	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 1 / 2 0 0 9</div> </div>
City NEW YORK State NY Zip Code 10022	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement UTILITIES	<div>42.09</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) VERIZON WIRELESS	<b>Transaction ID:</b> SB23-0.018992 <b>Date of Disbursement</b>
Mailing Address PO BOX 408	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 4 / 2 0 0 9</div> </div>
City NEWARK State NJ Zip Code 07101	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement PHONE SERVICE	<div>150000.00</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) WACHOVIA BANK NATIONAL ASSOCIATION	<b>Transaction ID:</b> SB23-0.018648 <b>Date of Disbursement</b>
Mailing Address PO BOX 563966	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 9 / 2 0 0 9</div> </div>
City CHARLOTTE State NC Zip Code 28262	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement BANK FEE	<div>32.97</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

150075.06

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 23 ☐ 24 ☒ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

WACHOVIA BANK NATIONAL ASSOCIATION

Mailing Address PO BOX 563966

City CHARLOTTE State NC Zip Code 28262

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.018648B

Date of Disbursement

05 / 11 / 2009

Amount of Each Disbursement this Period

39.72

B.

Full Name (Last, First, Middle Initial)

WACHOVIA BANK NATIONAL ASSOCIATION

Mailing Address PO BOX 563966

City CHARLOTTE State NC Zip Code 28262

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.018648C

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

33.49

C.

Full Name (Last, First, Middle Initial)

YUMA SOLUTIONS INC

Mailing Address PO BOX 13947

City TALLAHASSEE State FL Zip Code 32317

Purpose of Disbursement  
COMPUTER SUPPORT/EQUIPMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-0.018650

Date of Disbursement

06 / 23 / 2009

Amount of Each Disbursement this Period

5646.30

SUBTOTAL of Disbursements This Page (optional) .....

5719.51

TOTAL This Period (last page this line number only) .....

435267.41